



# ישיבת הדר אברהם צבי

## Adolph H. Schreiber Hebrew Academy of Rockland

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Dear Parent/Guardian:

Children need healthy meals to learn. ASHAR offers healthy meals every school day. Lunch costs \$850.00 for the school year. Children from households that meet federal income guidelines (outlined below) are eligible for free meals or reduced price meals. Reduced price meals beginning July 1<sup>st</sup>, 2019 in New York State will receive meals at no charge. To apply for free or reduced price meals, submit a Direct Certification letter from the NYS Office of Temporary and Disability Assistance OR complete the enclosed application, sign it, and return it to the Business Office as soon as possible. Please refer to the guidelines contained in this letter when completing the application. We cannot approve an application that is not complete, so be sure to fill out all required information.

1. **Do I need to fill out an application for each child?** No. Complete the application to apply for free or reduced price meals. Do not fill out more than one application for your household.

2. **Who can get free meals?** Children in households getting Food Stamps or TANF and most foster children can get free meals regardless of your income. Also, your children can get free meals if your household income is within the free limits on the Federal Income Guidelines. Each foster child must be listed on a separate application, with Part 2 completed and include an adult signature.

3. **Can homeless, runaway and migrant children get free meals?** Please call ASHAR to see if your child(ren) qualify, if you have not been informed that they will get free meals.

4. **Who can get reduced price meals?** Beginning July 1<sup>st</sup>, 2019 in New York State if your household income is within the reduced price limits on the Federal Income Chart, shown on this application you will receive lunch at no cost.

5. **Should I fill out an application if I received a letter this school year saying my children are approved for free or reduced price meals?** Please read the letter you received carefully and follow the instructions. Call the school at (845) 357-1515 x 2 if you have questions.

6. **My child's application was approved last year. Do I need to fill out another one?** Yes. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new year.

7. **I get WIC, can my child(ren) get free meals?** Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out an application.

8. **Will the information I give be checked?** The school may ask you at any time during the school year to verify your eligibility. You will be notified, in writing, if you have been selected for Verification. School officials may ask you to send papers showing that your child should receive free or reduce price meals at the time you applied.

9. **If I don't qualify now, may I apply later?** Yes. You may apply at any time during the school year if your household size goes up, income goes down, or if you start getting Food Stamps, TANF or other benefits. If you lose your job, your children may be able to get free or reduced price meals.

10. **What if I disagree with the school's decision about my application?** You should talk to school officials. You also may ask for a hearing by calling or writing to: ASHAR Business Office, 360 New Hempstead Rd., New City, NY 10956, 845-357-1515 ext. 2.

11. **May I apply if someone in my household is not a U.S. citizen?** Yes. You or your child(ren) do not have to be a U.S. citizen to qualify for free or reduced price meals.

12. **Who should I include as members of my household?** You must include all people living in your household, related or not (such as grandparents, other relatives, or friends). You must include yourself and all children who live with you.

13. **What if my income is not always the same?** List the amount that you normally get. For example, if you normally get \$1000 each month, but you missed some work last month and only got \$900, put down that you get \$1000 per month. If you normally get overtime, include it, but not if you get it only sometimes.

**14. We are in the military. Do we include our housing allowance as income?** If you get an off base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.

**15. My spouse is deployed to a combat zone. Is her combat pay counted as income?** No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn't received before she was deployed, combat pay is not counted as income. Contact your school for more information.

**16. My family needs more help. Are there other programs we might apply for?** To find out how to apply for [State SNAP] or other assistance benefits, contact your local assistance office or call 1(800) 342-3009.

**2018—2019 INCOME ELIGIBILITY GUIDELINES REDUCED PRICE MEALS OR FREE MILK**

Total Family Size	Annual	Monthly	Twice per Month	Every Two Weeks	Weekly
1	\$23,107	\$1,926	\$963	\$889	\$445
2	\$31,284	\$2,607	\$1,304	\$1,204	\$602
3	\$39,461	\$3,289	\$1,645	\$1,518	\$759
4	\$47,638	\$3,970	\$1,985	\$1,833	\$917
5	\$55,815	\$4,652	\$2,326	\$2,147	\$1,074
6	\$63,992	\$5,333	\$2,667	\$2,462	\$1,231
7	\$72,169	6,015	\$3,008	\$2,776	\$1,388
8	\$80,346	\$6,696	\$3,348	\$3,091	\$1,546
Each Add'l person add	\$8,177	\$682	\$341	\$315	\$158

**How to Apply:** To get free or reduced price meals for your children you may submit a Direct Certification letter received from the NYS Office of Temporary and Disability Assistance, OR carefully complete one application for your household and return it to the designated office. If you now receive food stamps, Temporary Assistance to Needy Families (TANF) for any children, or participate in the Food Distribution Program on Indian Reservations (FDPIR), the application must include the children's names, the household food stamp, TANF or FDPIR case number and the signature of an adult household member. All children should be listed on the same application. If you do not list a food stamp, TANF or FDPIR case number for all the children for whom you are applying, the application must include the names of everyone in the household, the amount of income each household member, and how often it is received and where it comes from. It must include the signature of an adult household member and that adult's social security number, or the word "none" if the adult does not have a social security number. An application that is not complete cannot be approved. Contact your local Department of Social Services for your food stamp or TANF case number or complete the income portion of the application.

**Reporting Changes:** The benefits that you are approved for at the time of application are effective for the entire school year. You no longer need to report changes for an increase in income or decrease in household size, or if you no longer receive food stamps.

**Income Exclusions:** The value of any child care provided or arranged, or any amount received as payment for such child care or reimbursement for costs incurred for such care under the Child Care Development (Block Grant) Fund should not be considered as income for this program.

**Reduced Price eligible Students: Beginning July 1, 2019 student in NYS that are approved for reduced rice meals will receive lunch meals at no cost.**

In the operation of child feeding programs no child will be discriminated against because of race, sex, color, national origin, age or disability.

Reapplication: You may apply for benefits any time during the school year. Also, if you are not eligible now, but during the school year become unemployed, have a decrease in household income, or an increase in family size you may request and complete an application at that time.

The disclosure of eligibility information not specifically authorized by the NSLA requires a written consent statement for the parent/guardian. We will let you know when your application is approved or denied.

**Nondiscrimination Statement:** This explains what to do if you believe you have been treated unfairly. In accordance with Federal law and U.S. Department of Agriculture policy, the USDA, its agencies, offices, and employees, and institutions are prohibited from discriminating on the basis of race, color, national origin, sex, disability, age. Or reprisal or retaliation for prior civil rights activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.) should contact the Agency (State or Local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally program information may be made available in languages other than English.

To file a complaint of discrimination, complete the USDA Program Discrimination Complaint Form. (AD-3027) found on line at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html). And at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866-632-992). Submit your completed form or letter to USDA by

Mail: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C/ 20250-9410

Fax: (202)-690-7442 or e mail: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

Sincerely,

David Katznelson

Executive Directo